

Clark County Regional Support Network Policy Statement


Policy No.: QM22
Policy Title: Provider Complaint and Grievance
Effective Date: September 1, 2001

Policy: The CCRSN will provide contracted providers with access to a complaint and grievance procedure. The CCRSN values resolving issues at the lowest possible level.

Reference: WAC 388-865, CCRSN, and any other applicable RCW/WAC statutes or codes Policy and Procedures for Inpatient - Appeal of Denial, Community Mental Health Services - Denial of Appeal, Billing and Reimbursement

Procedure:

1. Provider complaint and grievance procedures begin with informal problem resolution which may include:
 - a) Discussion facilitated by CCRSN staff with the provider resulting in a mutually agreed-upon resolution; and/or
 - b) Inclusion of CCRSN staff not involved in the original discussion.
2. If a complaint is not resolved to a provider's satisfaction, may submit a formal grievance. A formal grievance may be filed at any time and does not require an initial informal complaint process.
3. The CCRSN will coordinate data collection of complaints and grievances for quality management purposes and communicate this to the QMC.
4. Complaints or grievance about The CCRSN, or other providers within the CCRSN should be referred to the Quality Manager, or the QRT, who attempts to resolve the issues at the lowest level.
5. If the complaint or grievance is not resolved the issue will be forwarded to the Assistant Director of the Department. This will result in a written response to one or more of the parties involved, depending on the nature of the issue identified.
6. Complaints and or grievances may also be referred to the CCRSN for advise, mediation or resolution.

Approved By: 
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Clark County
Department of Community Services

Date: 1-4-05